

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13340

FILED  
Mar 16, 2012  
Secretary of State

Entity Name: VILLA CAPRI HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

770 VIA MILANO CIR  
APOPKA, FL 32712 US

**New Principal Place of Business:**

640 VIA MILANO CIR  
APOPKA, FL 32712 US

**Current Mailing Address:**

PO BOX 1348  
APOPKA, FL 32704 US

**New Mailing Address:**

640 VIA MILANO CIR  
APOPKA, FL 32712 US

FEI Number: 59-2874642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAREAU, STEPHEN  
770 VIA MILANO CIR  
APOPKA, FL 32712 US

**Name and Address of New Registered Agent:**

BROADWAY, SHARON  
640 VIA MILANO CIR  
APOPKA, FL 32712 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHARON R. BROADWAY

03/16/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: JIM, THOMPSON  
Address: 605 VIA MILANO  
City-St-Zip: APOPKA, FL 32712

Title: S  
Name: ANDERSON, DELORES  
Address: 609 VIA MILANO  
City-St-Zip: APOPKA, FL 32712

Title: VP  
Name: YOUNG, JOYCE  
Address: 767 VIA MILANO  
City-St-Zip: APOPKA, FL 32712

Title: T  
Name: BROADWAY, SHARON  
Address: 640 VIA MILANO  
City-St-Zip: APOPKA, FL 32712

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHARON R. BROADWAY

T

03/16/2012

Electronic Signature of Signing Officer or Director

Date